

DEVAL L. PATRICK GOVERNOR JOHN W. POLANOWICZ SECRETARY

The Commonwealth of Massachusetts

Executive Office of Health and Human Services
Department of Public Health
Bureau of Health Care Safety and Quality
Medical Use of Marijuana Program
99 Chauncy Street, 11th Floor, Boston, MA 02111

Telephone: 617-660-5370 www.mass.gov/medicalmarijuana

Open County Application

Background

This application represents an extension of the Phase 2 application process for non-profit entities seeking approval to operate a registered marijuana dispensary (RMD) in Massachusetts. In an effort to ensure geographic distribution, selected applicants deemed qualified to operate an RMD have been invited to amend their applications to seek a dispensary site in a county without a selected RMD, including Berkshire, Bristol, Dukes, Franklin, Hampden, Nantucket, and Suffolk. Only those entities that were invited to amend their application for an open county may submit an application.

Dispensary Site Proposals

Applicants may propose up to two sites in their application for locating their dispensary. **Each site must be in a different county.** An applicant is not required to propose more than one site for their dispensary. Identifying a second proposed site is optional.

Applicants may indicate their preference between the proposed sites for their dispensary, but are not guaranteed their site of first preference.

Please note that the Department will not approve more than one dispensary site per application.

Instructions

Applicants must complete and submit the following attached forms and any requested associated documents:

- Application Response Form Cover Page
- Form 1: Proposed Location(s) Dispensary Site #1, #2
- Form 2: Letter of Support or Non-Opposition Dispensary Site #1, #2
 - Applicant May Choose to Use CEO/CAO or Board Template
- Form 3: Log of Engagement Activities with Local Officials and Stakeholders Dispensary Site #1, #2,
- Form 4: Community Narrative Dispensary Site #1, #2



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- Form 5: Patient Population Narrative Dispensary Site #1, #2
- Form 6: RMD Start-Up Timeline Dispensary Site #1, #2
- Form 7: Capital Expenses Dispensary Site #1, #2
- Form 8: Year-One Operating Budget Dispensary Site #1, #2
- Form 9: Three Year Business Plan Budget Projections Dispensary Site #1, #2

If the applicant proposes more than one site for their dispensary, the applicant must indicate the sites in the application forms and provide all requested information and attachments for each site. Forms 1-9 must be completed for each proposed dispensary site using the forms designated with "Dispensary Site #1" for the first proposed site and the form with "Dispensary Site #2" for the second proposed site. In the event the applicant does NOT propose a second site, indicate "Not Applicable" (N/A) on all the forms labeled with "Dispensary Site #2".

SEE EACH FORM FOR FULL DETAIL ON REQUIRED INFORMATION

Requested attachments must be submitted attached to the form provided with a paper clip.

Applicants must submit one hard original (single-sided) with wet signatures on the Application Response Form Cover Page and 2 hard copies. Unless requested as a separate attachment in the application, all answers must be typed in the provided forms.

Each original and copy submitted must be a complete, collated response, secured with a binder clip (no ring binders, spiral binding, or folders), with all pages printed on 8.5 x 11 paper.

Completed application materials must be mailed or hand-delivered between August 1 and August 29, 2014 at 3:00 P.M EST to:

> The Department of Public Health Medical Use of Marijuana Program 99 Chauncy Street, 11th Floor Boston, MA 02111.

Applications will not be accepted after the deadline of August 29, 2014 at 3:00pm.



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On July 9, 2014 from 11:00 a.m. – 1:00 p.m. DPH will be holding an Applicants Informational Meeting for qualified applicants to learn about this step of the application process. The meeting will be held at The Department of Public Health, 250 Washington Street, 2nd Floor Public Health Council Room, Boston, MA 02108

The anticipated announcement for outcomes of this stage in the application process will be in October, 2014.

Materials

The Open County Application materials will be emailed to applicants and posted on the Program website at mass.gov/medicalmarijuana. The Applicants' Informational Meeting Power Point presentation will also be posted on the program web-site as well as the final Questions and Answers document.

Process

After the applicant submits their Open County Application, the Department will complete the verification process, including verification of information submitted on November 21, 2013, as applicable; expanded background checks; verifying local support; conducting extended reviews of financial management, investors; operational plans and management structure; and reviewing the status of relationships with host communities.

Background checks will be conducted on: individual or corporate investors contributing any amount of capital towards the RMD; executive team members; any staff members; members of the Board of Directors; advisors and Advisory Board members; consultants; and volunteers. Applicants will cover the cost of the expanded background checks.

Applicants will be required to attest that all information submitted during the application process is truthful, complete and accurate.

The Department will convene the Selection Committee to review all applications, with a focus on patient access and geographic equity. The Selection Committee will make their recommendations to the Executive Director.



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The Executive Director will make the final decisions on the outcomes of the applications.

Updates and Questions

After the release of the application, applicants will be held responsible for complying with any and all updates, instructions, or directions provided by the Department through the Applicants' Informational Meeting and/or via the applicant's designated contact person's email account.

Questions regarding this application will be considered, reviewed and responded to only when asked at the Applicants Informational Meeting scheduled for July 9, 2014 or submitted no later than July 18, 2014 at 5:00 p.m. via email to RMDApplication@state.ma.us. Questions submitted to the Department in any other format will not be considered. Answers to questions will be sent to the entire group of applicants via email.

Application Calendar

EVENT	DATE
Application Release: Application Emailed to	July 9, 2014
Applicants	
Applicants' Informational Meeting	July 9, 2014 at 11:00 a.m. – 1:00 p.m.
Deadline for Questions from Applicants	July 18, 2014 at 5:00 p.m.
Final Questions and Answers Emailed to Applicants	July 25, 2014
and Posted Online	
Submittal of Application	August 1 to August 29, 2014 by 3:00 p.m.
Anticipated Announcement	October, 2014

Public Records

Please note that all application responses, including all attachments, will be subject to release pursuant to a public records request, as redacted pursuant to the requirements to M.G.L. c. 4, § 7(26).